



# Exemption Information Form for Nebraska Prescription Drug Monitoring Program (PDMP)

For data uploaders/pharmacy users, this form is a voluntary option to provide information as it relates to meeting one of the identified exemptions according to Neb. Rev. Stat. § 71-2454(6)(b). The information collected in this form is specific to the listed exemptions as they apply in 2017 and form must be updated for 2018. This is not a legally binding form. The completion of this form does not guarantee your exemption from reporting to the Nebraska PDMP system. All submitted forms will be cross referenced with the current licenses according to the Nebraska Department of Health and Human Services, Division of Public Health, Licensure Unit.

| Please provide the information below. (Print or Type)  |  | Pharmacy Contact Information: |                     |
|--|--|-------------------------------|---------------------|
| <u>Name of Pharmacy</u>  |  | <u>Street Address</u>         |                     |
| <u>Name of PIC</u>   |  | <u>City</u>                   | <u>State</u>        |
| <u>Pharmacy License/Permit #</u>   | <u>Pharmacy DEA Registration #</u>     | <u>Zip Code</u>               | <u>Phone Number</u> |
| <u>Pharmacy NPI #</u>  | <u>Email Address: Point of Contact</u> |                               |                     |
| <b>EXEMPTIONS:</b> (Check one box below)   |  |                               |                     |
| <b>Dispenser is exempt from submitting per Neb. Rev. Stat. §71-2454(6)(b).</b><br>Dispenser means a person authorized in the jurisdiction in which he or she is practicing to deliver a prescription to the ultimate user by or pursuant to the lawful order of a prescriber but does not include:<br><input type="checkbox"/> (i) the delivery of such prescription drug for immediate use for purposes of inpatient hospital care or emergency department care,<br><input type="checkbox"/> (ii) the administration of a prescription drug by an authorized person upon the lawful order of a prescriber,<br><input type="checkbox"/> (iii) a wholesale distributor of a prescription drug monitored by the prescription drug monitoring system, or<br><input type="checkbox"/> (iv) through December 31, 2017, a veterinarian licensed under the Veterinary Medicine and Surgery Practice Act when dispensing prescriptions for animals in the usual course of providing professional services. |  |                               |                     |
| <b>IF APPLICABLE:</b>  |  |                               |                     |
| <b>Dispenser does not dispense ANY controlled substance prescriptions and would like to voluntarily provide information to identify as an entity that does not have any data to submit to the PDMP to comply with LB 471 for 2017.</b><br><input type="checkbox"/> Pharmacy chooses to NEVER have ANY controlled substance prescriptions dispensed.  |  |                               |                     |
| <b>Signature:</b>  |  | <b>Date:</b>                  |                     |

**Submit Completed Form To:** Nebraska Health Information Initiative at [PDMP@nehii.org](mailto:PDMP@nehii.org).

**Questions about Exemption Information Form, please contact:** Amy Reynoldson, DHHS Prescription Drug Overdose Prevention Coordinator, [amy.reynoldson@nebraska.gov](mailto:amy.reynoldson@nebraska.gov), 402-471-0835